WEST VIRGINIA INSURANCE COMMISSIONER Agents Licensing & Education PO BOX 50541 CHARLESTON WV 25305-0541 (304) 558-0610

LATE RENEWAL APPLICATION FOR PRODUCERS License Year 6-1-2003 thru 5-31-2004

WV License #
PRINT Full Name:
(Last Name – First Middle)
Home Address:
□ Check if this is a new address Residents If you have moved from West Virginia to another state, contact our office before proceeding. Non-Residents - If you have moved to another state, a current, original Letter of Certification from your new home state insurance department must be attached to this form.
CASH cannot be accepted. Payment must be made by check or money order. Please record: CHECK # Date of Check AMOUNT: \$50.00 (payable to West Virginia Insurance Commissioner)
Attached is the \$50.00 fee to renew my West Virginia producer's license for the license year June 1, 2003, thru May 31, 2004. I understand that I must be reappointed to any insurance company I intend to represent in West Virginia and I will contact the company(ies) and advise them to submit the proper appointment and fee to the West Virginia Insurance Department.
Signature:
Date:
Mail Late Renewal form, attachments, if any, and fee to: West Virginia Ins. Comm. Agents Licensing & Education PO Box 50541 Charleston WV 25305-0541